APPLICATION FOR UNITED STATES LETTERS PATENT

FOR

EXPANDABLE PENETRATING NEEDLE AND METHOD OF USE

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EXPANDABLE PENETRATING NEEDLE AND METHOD OF USE

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BACKGROUND AND SUMMARY OF THE INVENTION

[0001] The present invention relates to an expandable penetrating needle. More specifically, the present invention relates to a needle having a main body that is shaped essentially like a sharply pointed cone when in an unexpanded state, but that opens into a substantially cylindrical shape when expanded. The needle is substantially hollow, such that a second needle or other similar tubing may be passed therethrough. Insertion of a second needle or other tubing into the penetrating needle causes its expansion. The expandable penetrating needle may be used to pierce various materials, such as rubber or plastic. However, the expandable penetrating needle is especially well suited for use in venipuncture procedures, wherein the skin and vein of a patient must be penetrated.

[0002] Various procedures require the non-destructive piercing of a flexible or semi-rigid material, typically in order to gain access to the contents of a container to which the flexible material is affixed. Such materials are commonly formed from a plastic, or more commonly, from a rubber material. For example, rubber stoppers may be used to seal vials or other containers of laboratory chemicals, such as reagents and the like. Access and removal of such chemicals or other materials is typically accomplished by piercing the rubber stopper with a needle, cannula, or other similarly sharp-tipped hollow tool. The desired amount of chemicals may then be drawn into a syringe or

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other container. Upon removal of the needle or cannula, the hole produced in

the stopper thereby is substantially resealed by the expansion of its rubber

composition.

[0003] Another common procedure requiring the non-destructive piercing

of a flexible material is the insertion of a needle into the tissue of a patient.

One such procedure is commonly referred to as venipuncture, and involves

passing a needle through a patients skin and into a vein, whereby access to

the patients blood supply is accomplished. Venipuncture may be practiced as

a portion of a variety of medical procedures. For example, drug introduction

and the drawing of a blood sample (phlebotomy) both employ venipuncture.

Various devices may be employed in a typical venipuncture procedure, such

as, for example, a hypodermic needle and syringe, a single or multi-sample

needle and an evacuated collection tube, and a winged (butterfly) needle that

may be connected to an infusion set, a syringe, or an evacuated collection

tube. Venipuncture is also practiced when inserting a catheter into a patient's

vein. In this case, a needle is used to penetrate the vein and a catheter tube

is thereafter inserted into the vein, over the needle, and into the hole in the

vein made by the needle.

[0004] Needles come in various shapes and sizes, depending largely on

their intended use. For example, needles may be single-ended, such as for

use with a syringe, or double-ended, such as for use with an evacuated

collection tube. Needles generally consist of a shaft that is inserted into the

patient, and a hub for attachment to a syringe, collection tube, or other device.

The penetrating end of the needle is typically beveled, with the leading edge

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of the bevel forming the point of the needle. Double-ended needles typically

have a bevel and point at both ends. The point is typically made as sharp as

possible to provide for penetration of a patient's skin and vein (and the rubber

stopper of a collection tube in the case of double-ended needles). Needles

are also generally hollow to allow for the delivery of fluids or to allow for the

withdrawal of an amount of a patient's blood. The passageway that runs

through the length of the needle is commonly referred to as the lumen. The

diameter of the lumen determines the gauge, or size, of the needle.

addition to their use in venipuncture procedures, such needles may also be

used to pierce other flexible materials, as described above.

[0005] The use of such needles is not without problems, however -

whether they are used to pierce flexible materials, such as plastic and rubber,

or in venipuncture procedures. In order to properly withdraw or inject fluids

through a needle, the lumen must be of adequate diameter. Adequate lumen

diameter is based, at least somewhat, on the type and viscosity of the

material to be passed through the needle. Additionally, a needle will

encounter at least some resistance during piercing of a patient's skin, a

rubber stopper, or another material to be penetrated. As such, the needle

must have sufficient strength and rigidity to prevent it from bending or

breaking during insertion. Thus, in addition to the diameter of the lumen, the

needle must also have a wall thickness sufficient to impart the necessary

rigidity thereto. This wall thickness contributes to the overall diameter of the

needle, which diameter must pass through the material to be penetrated.

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Obviously, a needle of greater diameter will create a larger opening [0006]

in the material it penetrates. Therefore, it is typically desired, particularly in

venipuncture, to use the smallest needle possible. The use of a smaller

needle will encounter less resistance from a patient's skin and vein (or

another material to be penetrated), thereby generally producing less pain and

resulting in less bleeding. However, the minimum diameter of a needle used

in venipuncture is limited. For example, when dispensing intravenous drugs,

the needle must be able to adequately pass the material into the patients vein.

In a catheter procedure, the needle must be large enough to create a hole of

sufficient size to accept the catheter. And, in phlebotomy, a lumen of too

small a diameter can cause damage to red blood cells, leading to an unusable

blood sample.

[0007] The bevel common to typical needles is intended to make insertion

(penetration) of the needle easier. The bevel allows the diameter of the

needle to be inserted incrementally - as opposed to the instantaneous

insertion of the needle's diameter that would occur with a blunt (squared off)

tip. The use of a bevel also has drawbacks, however. For example, it is

known to be somewhat difficult to produce a bevel on needles, especially

those of small diameter (gauge), while simultaneously maintaining a sharp

point and a clean lumen opening. Also, while the bevel allows for incremental

insertion of the needle diameter, it also requires that a greater length of

needle be inserted before materials may be withdrawn or injected

therethrough. The bevel also imparts a larger surface area to the cutting

portion of the needle.

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[8000] Thus, use of typical, known needles, can be problematic for a

number of reasons. For example, when using such needles to penetrate

rubber stoppers or similar other closures, the sharpened bevel of the needle

often cuts or otherwise abrades away portions of the closure material.

Therefore, holes are eventually formed through the closure that cannot be

closed by the expansion of its composition. The closure material may also

enter into and clog the needle during insertion. When used in venipuncture,

such needles tend to cut a substantial hole into the patient's skin and vein.

The greater the gauge of the needle, the larger the hole, and the more pain a

patient must endure. Additionally, such needles may be very difficult to use

properly on a patient with small, collapsed, or "rolling" veins. In such cases, it

is easily possible to pass the tip of the needle through the entire vein, or to

completely miss the vein.

[0009] The expandable penetrating needle of the present invention

overcomes the aforementioned shortcomings of typical, known needles. In

comparison to typical needles, which require that the full diameter of the

needle cut through the material to be penetrated (such as the skin and vein of

a patient), the expandable penetrating needle of the present invention is

designed to produce a smaller initial entryway. Thus, penetration of a subject

material by the expandable penetrating needle of the present invention is less

invasive than penetration by typical needles.

In order to produce a minimal entryway through the material to be

penetrated, the expandable penetrating needle of the present invention is

preferably designed to have a substantially conical shape when in an

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unexpanded state. More specifically, the expandable penetrating needle has

a shaft that is formed into a segmented cone having a sharp point. The shaft

may be perforated, scored, or possess weakened sections, for example, that

divide the cone into a plurality of substantially triangular sections. The base of

the conical shaft may be attached to a variety of hubs or other similar

attachment structures. For example, when employed in the medical field, the

expandable penetrating needle may be designed for attachment to a

hypodermic syringe, an evacuated collection tube holder, a butterfly infusion

system, or a catheter insertion apparatus. A multitude of other configurations

are also possible.

The segmented design of the expandable penetrating needle shaft [0011]

allows it to expand upon insertion of another device. For example, a section

of tubing, such as a second needle or catheter may be inserted into the hub of

the expandable penetrating needle. As the second needle or section of tubing

is moved toward the tip of the expandable penetrating needle, the individual

segments of the conical shaft are forced to separate and expand. Expansion

of the segments causes a stretching of the penetrated material surrounding

the outside of the expandable penetrating needle shaft, thereby allowing the

initially created entryway to be enlarged, and the second needle or tubing to

pass therethrough. Consequently, it can be understood that the expandable

penetrating needle of the present invention can be used to permit the

substantially less invasive insertion of a device of considerably greater

diameter than the entryway initially created by the needle. Because the

expandable penetrating needle produces an enlarged entryway by gradual

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expansion, as opposed to cutting, penetration of a material can be achieved

with less destructive effect on the penetrated material and, in the case of

venipuncture, with less pain experienced by the patient.

As discussed above, an expandable penetrating needle of the [0012]

present invention may have a plurality of uses, and may be connected to a

better understanding of the expandable variety of other devices.

penetrating needle of the present invention can be gained by reference to the

following detailed description of certain exemplary embodiments thereof.

BRIEF DESCRIPTION OF THE DRAWINGS

[0013] In addition to the features mentioned above, other aspects of the

present invention will be readily apparent from the following descriptions of

the drawings and exemplary embodiments, wherein like reference numerals

across the several views refer to identical or equivalent features, and wherein:

Figure 1a is an enlarged view illustrating a known type of needle,

commonly referred to as a hypodermic needle;

Figure 1b is an enlarged view illustrating a similar, known needle,

and its use in a catheter assembly;

Figure 2a depicts a venipuncture procedure, wherein a typical

hypodermic needle has been inserted into a normal vein of a patient;

Figure 2b depicts a venipuncture procedure, wherein a typical

hypodermic needle has been inserted into a small, or collapsed vein of a

patient;

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Figure 3a is an enlarged view, in partial cross-section, showing one

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embodiment of an expandable penetrating needle of the present invention in

an unexpanded state;

Figure 3b shows the expandable penetrating needle of Figure 3a in

an expanded state:

Figure 4a is an enlarged view showing another embodiment of an

expandable penetrating needle of the present invention in an unexpanded

state;

Figure 4b shows the expandable penetrating needle of Figure 4a in

an expanded state;

Figure 5a is an enlarged cross-sectional view of the expandable

penetrating needle of Figure 4a;

Figure 5b is an enlarged cross-sectional view, showing a second

needle partially inserted into the expandable penetrating needle of Figure 5a;

Figure 5c is an enlarged, partial cut-away view, showing the needle

assembly of Figure 5b with substantially full insertion of the second needle

into the expandable penetrating needle;

6a depicts a venipuncture procedure,

expandable penetrating needle of the present invention has been inserted into

a small, or collapsed vein of a patient, to facilitate the subsequent insertion of

a typical hypodermic needle; and

Figure 6b shows the arrangement of Figure 6a, with the hypodermic

needle fully inserted through the expandable penetrating needle and into the

patient's vein.

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DETAILED DESCRIPTION OF THE EXEMPLARY EMBODIMENT(S)

[0014] The expandable penetrating needle of the present invention is

designed to be used in a variety of applications, including those in which

typical needles are currently employed. A typical hypodermic needle 5 can be

observed by reference to Figure 1a. The hypodermic needle 5 can be seen to

have a shaft 10 that is attached at a first end to a hub 15. The hub 15 is

provided to attach or connect the needle 5 to another device, such as a

syringe or evacuated collection tube holder, for example. The second end of

the shaft 10 is provided with a bevel 20 that forms a point 25 at the tip of the

needle 5. The bevel 20 acts as a cutting edge to allow the shaft 10 of the

needle 5 to pass through a material to be penetrated. The hollow interior of

the needle is generally referred to as the lumen 30. The diameter of the

lumen 30 determines the gauge, or size, of the needle.

[0015] Other types of needles also exist. For example, double-ended

needles, with each end having a bevel, are produced for use with evacuated

collection tubes/holders. Such devices are commonly used during

phlebotomy. Other needles may be used to provide an entryway, or pilot

hole, for the insertion of another device. For example, in the medical field,

needles are typically used to create an entryway into a patient's vein for the

insertion of a catheter. A portion of such an assembly 35 is depicted in Figure

1b. As can be seen from this portion of the catheter assembly 35, a

penetrating needle 40 is located interior to a section of hollow catheter tubing

50. It is also possible for the catheter tubing to reside inside the lumen 45 of

the needle, although such an arrangement is generally less common. In such

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an assembly, the needle 40 is first inserted through a patient's skin and into a

vein. Once the needle is secured, the catheter tubing 50 is passed over the

needle 40, and inserted into the vein through the hole therein made by the

needle. As the catheter tubing 50 is generally of considerably larger diameter

than the needle 40, the leading end of the catheter tubing may be beveled or

otherwise designed to facilitate its entry into the vein. However, even with

such treatment, forcing the catheter into the vein will generally cause

discomfort to the patient, and may be harmful to the vein and other tissue of

the patient through which it passes. Once the catheter tubing 50 is inserted,

provision is generally made for removal of the needle 40.

Use of a hypodermic needle, like that shown in Figure 1a, can be

seen by reference to Figures 2a and 2b. In Figure 2a, the hypodermic needle

5 is shown attached to a syringe 55. The hypodermic needle 5 has been

inserted into the arm 60 of a patient, whereby the needle has penetrated both

the skin 65 and a vein 70 of the patient. The needle 5 and syringe 55 are

shown to be oriented at a slight angle with respect to horizontal (and the

patient's arm), which angle is typically about 15°. As can be observed from

Figure 2a, and the following example, an entryway is created through the

tissue of the patient's arm by the needle 5, the angle of entry and beveled

cutting edge 20 of which can increase the size of the entryway beyond that of

the needle diameter. In this particular example, the needle 5 has been

inserted into a substantially normal vein 70 (i.e., the vein is of normal size and

is not collapsed).

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The hypodermic needle 5 and syringe 55 of Figure 2a are again [0017]

shown inserted into the arm 75 of a patient in Figure 2b. Again, the needle 5

and syringe 55 are shown to be oriented at a slight angle with respect to

horizontal, and the needle has penetrated through the patient's skin 80 and

into a vein 85. However, in this example the vein 85 is shown to be collapsed,

such as may occur from, for example, repeated injection (needle penetration)

of the same site. A similar problem may occur when performing venipuncture

on a patient with small veins, such as a child or an elderly person. In either

case, the vein generally has a significantly reduced diameter. As such, it may

be exceedingly difficult, if not impossible, to insert the needle 5 into the vein

without at least the tip 25 of the needle also penetrating partially or fully

through both walls thereof. Further, insertion of the needle 5 to a point

wherein less than the whole of the lumen 30 resides within the vein can cause

blood loss and an incomplete blood draw or injection.

As can be understood from the above examples, when using [0018]

penetrating needles, it is desirable to minimize the size of the entryway that

must be cut through the material to be penetrated. Such is true whether the

needle is used to pierce an inanimate object, such as a rubber or cork

stopper, or the tissue of a living patient. In either case, minimizing the size of

the cut entryway reduces damage to the material to be penetrated and allows

the entryway to be more easily resealed after needle withdrawal. Additionally,

as expressly shown in the example of Figure 2b, it is also desirable to

minimize the size (diameter and length) of such a needle when it is utilized to

perform venipuncture on a collapsed, small, or rolling vein.

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The expandable penetrating needle of the present invention [0019]

minimizes or eliminates many of the disadvantages associated with the use of

typical needles. One embodiment of an expandable penetrating needle 100

of the present invention can be observed in Figure 3a. While the embodiment

of the expandable penetrating needle shown in Figure 3a, as well as the other

exemplary embodiments depicted in the remaining drawing figures will be

described specifically with respect to their use in venipuncture, it should be

realized that such needles could also be used in a variety of other areas, such

as has been briefly discussed above. The expandable penetrating needle

100 of Figure 3a is shown in an unexpanded condition. The expandable

penetrating needle 100 can be seen to have a shaft 105 of substantially

conical shape. The distal end 110 of the shaft is formed into a sharp point

(tip) 115 when the needle 100 is in an unexpanded state, while the proximal

end (base) 120 of the shaft is attached to a hub 125. It is also contemplated

that the base 125 of the needle shaft 105 could form the hub 125. The hub

125 has a forward portion 130 that is attached to the base 120 of the needle

shaft 105, and an open, receiving end 135 opposite thereof. In this particular

embodiment, the hub 125 is merely provided to be grasped by a user of the

expandable penetrating needle 100 and to receive a section of tubing 160,

such as catheter or intravenous tubing, that will eventually be passed through

the needle. Thus, in this particular embodiment, it is not required that the hub

125 be of a specific shape or size.

When the expandable penetrating needle 100 will be used for [0020]

phlebotomy, it is preferred that at least the forward portion 130 of the hub 125

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be transparent, or otherwise allow a user of the needle to view a flow of blood

from the patient's vein. In this manner, the phlebotomist is able to determine

with certainty that the expandable penetrating needle 100 has been

adequately inserted into the vein. As will be described in more detail below,

the shaft 105 of the expandable penetrating needle 100 may also be modified

to facilitate this process.

[0021] The shaft 105 of the expandable penetrating needle 100 is shown

to be divided into a plurality of segments 140, 145, 150. In this particular

embodiment the shaft is divided into three segments 140, 145, 150, but a

fewer or greater number of segments are also possible. The segments 140,

145, 150 may be produced by cutting or scoring the shaft, for example. If the

expandable penetrating needle 100 is of molded construction, it is also

anticipated that the segments 140, 145, 150 may be produced by providing

minute areas of weakened (thinner) material therebetween. The cuts, score

lines, or other means of segmenting the shaft 105 may run through the tip 115

or, alternatively, may stop slightly short of the tip to help ensure that the

segments are maintained in a tightly abutting relationship while the

expandable penetrating needle **100** is in an unexpanded state.

[0022] As shown in Figure 3a, it is anticipated that the tubing 160 may be

partially inserted into the hub 125 of the expandable penetrating needle 100

prior to insertion of the expandable penetrating needle into a patient. For

example, the expandable penetrating needle 100 and tubing 160 may be

provided as a pre-assembled kit, or the components may be supplied

separately and assembled prior to use. Preferably, the fit of the outer

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diameter of the tubing 160 and the inner diameter of the hub 125 or the base

120 of the needle shaft 105, depending on needle construction, provides a

substantial seal and also prevents inadvertent movement of the tubing toward

the tip 115 of the expandable penetrating needle 100. Other means of tubing

retention may also be employed. For example, it is contemplated that a

threaded collar (not shown) may be provided at the open end 135 of the hub

125 to engage a like-threaded portion (not shown) of tubing. In this

embodiment, rotation of the collar in a first direction controllably and

incrementally forces the tubing into the needle, while rotation of the collar in

an opposite direction withdraws the tubing from the needle. The threaded

portion of the tubing may be integral thereto or, alternatively, may be applied

to the tubing, such as in the form of an adhesively attachable section.

[0023] Once the needle tip 115 has been properly inserted into a patient's

vein, the tubing 160 may be pushed through the needle shaft 105. The

expandable penetrating needle 100 may be held in place by the user during

this operation but, preferably, the needle is secured to the patient, such as

with tape or the like. As the tubing 160 is pushed into the needle, the

segments 140, 145, 150 are forced to progressively separate, causing the

outside diameter of the needle shaft 105 to gradually increase, and thereby

slowly stretching the initial entryway produced in the vein by the needle tip

115. As the tubing approaches the now open distal end 110 of the

expandable penetrating needle 100, the needle shaft 105 becomes

substantially cylindrical in shape, with its inner diameter typically, but not

essentially, similar in dimension to the outside diameter of the tubing 160. A

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mark or similar indicator may be provided on the tubing 160 to alert the user

when the distal end thereof has reached the distal end 110 of the needle shaft

105.

[0024] Once the tubing 160 has been properly inserted into the vein, the

user has the option of retracting the expandable penetrating needle 100 from

the patient. For example, if the tubing 160 will be used only for a short-term

procedure, the user may simply leave the expandable penetrating needle 100

in its inserted position, whereafter it may be withdrawn from the patient along

with the tubing. However, if the tubing 160 will be used for a long-term

procedure, the user may wish to remove the expandable penetrating needle

100 from the patient and allow only the tubing to remain in the vein. The

expanded inner diameter of the needle shaft 105 allows the expandable

penetrating needle 100 to be retracted from the patient and moved to a

position along the tubing 160 that is safely removed from the patient and/or

contact by the user or others. The retracted expandable penetrating needle

100 may be affixed to the tubing 160 by a number of means, such as, for

example, a piece of tape. However, it is contemplated that the hub 125 of the

expandable penetrating needle 100 may also have an optional retention

mechanism 165, such as the spring-loaded hook shown attached thereto. In

this embodiment, the hook 165 is designed to mate with a corresponding

connector 170 that is affixed to the tubing 160 at a location away from the

patient. As with the expandable penetrating needle 100, the connector 170

may come pre-installed to the tubing 160, or may be installed to the tubing by

the user prior to installation of the expandable penetrating needle. Preferably,

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the connector 170 is designed to be moveable along the length of the tubing

160, but to also firmly resist inadvertent movement. Such may be

accomplished, for example, by carefully controlling the fit of the connector

inner diameter to the outer diameter of the tubing 160, or by forming at least

the inner diameter of the connector 170 from a material that firmly but

releasably grips the tubing. Such constructions are known and need not be

discussed in detail herein.

[0025] An alternate embodiment of an expandable penetrating needle 200

of the present invention in an unexpanded and expanded state is shown in

Figures 4a and 4b, respectively. This embodiment of the expandable

penetrating needle 200 is similar in design to the embodiment 100 shown in

Figures 3a-3b. Like the embodiment of Figures 3a-3b, the expandable

penetrating needle 200 can be seen to have a segmented shaft 205 of

substantially conical shape with a distal end 210 thereof formed into a sharp

point (tip) 215. The proximal end (base) 220 of the shaft 205 is attached to a

specialized hub 225. The hub 225 has a forward portion 230 that is attached

to the base 220 of the needle shaft 205, and an open, receiving end 235

opposite thereof. In this particular embodiment of the expandable penetrating

needle 200, the hub 225 is specifically designed to mate with the hub of

another needle, such as, for example, a hypodermic needle, or a double-

ended needle. In this manner, the expandable penetrating needle 200 can be

used in conjunction with another needle during venipuncture to more easily

penetrate a patient's skin and vein. A hypodermic needle attached to a

syringe or a double-ended needle attached to an evacuated collection

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tube/holder, for example, may thereafter be inserted through the expandable

penetrating needle 200.

[0026] The expandable penetrating needle 200 depicted in Figures 4a-4b can be seen in cross-section in Figures 5a-5c. As shown in Figure 5a, the base 220 of the needle shaft 205 may be somewhat elongated to help in guiding the device, in this case the needle, that will be passed therethrough. In this particular embodiment of the expandable penetrating needle 200, the needle shaft 205 and hub 225 are of two-piece construction. Thus, the base 220 of the needle shaft 205 is shown to reside within a forward portion 230 of the hub 225. It is also contemplated that the forward portion 230 of the hub 225 could reside within the base 220 of the needle shaft 205. It is also possible that the expandable penetrating needle 200 could be of one piece construction, wherein the base 220 of the needle shaft 205 and the forward portion 230 of the hub 225 could have substantially the same inside diameter. Like the shaft 105 of the expanding penetrating needle 100 shown [0027] in Figures 3a-3b, the shaft 205 of the expandable penetrating needle 200 is divided into three segments 240, 245, 250. The shaft 205 could also be divided into a fewer or greater number of segments. The segments 240, 245, 250 may be produced by cutting or scoring the shaft, for example. If the expandable penetrating needle 200 is of molded construction, it is also anticipated that the segments 240, 245, 250 may be produced by providing minute areas of weakened (thinner) material therebetween. The cuts, score lines, or other means of segmenting the shaft 205 may run through the tip 215 or, alternatively, may stop slightly short of the tip to help ensure that the

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segments 240, 245, 250 are maintained in a tightly abutting relationship while

the expandable penetrating needle **200** is in an unexpanded state.

[0028] As shown in Figures 5a-5b, it is also possible that the hub 225 may

contain a seal **260**. The seal **260** is provided primarily for use in phlebotomy

applications, to help prevent any of the initial flow of blood that occurs after

insertion of the tip 215 of the expandable penetrating needle 200 into a

patient's vein from exiting the open end 235 of the hub 225. The design of the

seal **260** may depend on the type of second needle **265** to be passed through

the expandable penetrating needle 200. For example, if a blunt-ended

second needle is to be used, the seal may be substantially a grommet,

wherein a predefined (but substantially sealed) passageway is located

therethrough. If the second needle has a beveled end, it may be possible to

employ a solid seal 260, wherein the second needle simply punctures the seal

upon its insertion into the expandable penetrating needle 200.

[0029] As can be best observed by specific reference to Figure 5b, when

the second needle 265 is initially inserted into the expandable penetrating

needle 200, it may be guided by the inside diameter of the hub 225, or in this

particular case, the inside diameter of the base 220 of the needle shaft 205.

The length of the guiding section may vary. It is also possible that the outside

diameter of the second needle 265 may be smaller than the inside diameter of

the hub 225 or base 220 of the needle shaft 205, in which case the second

needle may not make contact with the expandable penetrating needle 200

until the second needle reaches the conical (tapered) portion of the needle

shaft 205. In any event, as the second needle 265 is inserted further into the

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expandable penetrating needle 200, the shaft 205 thereof is caused to expand

by a separation of the segments 240, 245, 250. The expandable penetrating

needle 200 is shown in an expanded state in Figure 5c.

As shown in Figure 5c, this particular embodiment of the [0030]

expandable penetrating needle 200 is designed to mate with, or engage, a

hub 270 of the second needle 265. Further, in this particular embodiment, full

insertion of the second needle 265 (as shown) into the expandable

penetrating needle 200 is indicated by full insertion of the hub 270 of the

second needle 265 into the hub 225 of the expandable penetrating needle

In this case, when the second hub 270 is fully inserted into the **200**.

expandable penetrating needle hub 225, the tip 275 of the second needle 265

is substantially aligned with the distal end 210 of the expandable penetrating

needle shaft 205. At full insertion, it is also possible that the tip 275 of the

second needle 265 may reside slightly within the expandable penetrating

needle shaft 205, or protrude slightly therefrom. However, it is preferred that

the tip 275 the second needle 265 not be allowed to protrude too far from the

distal end 210 of the expandable penetrating needle shaft 205, as it may

penetrate through the bottom wall of the vein. In other embodiments, the hub

270 of the second needle 265 may not be inserted into the hub 225 of the

expandable penetrating needle 200. For example, the distal end of the hub

270 of the second needle 265 may simply abut the open end 235 of the

expandable penetrating needle 200. Alternatively, the hubs 225, 270 may not

make contact due to, for example, the length of the second needle 265. In

this case, it is preferable that the second needle 265 be marked to indicate

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the point of insertion wherein the tip 275 thereof will exit the open distal end

210 of the expandable penetrating needle shaft 205.

[0031] As mentioned above with respect to the embodiment of Figures 3a-

3b, when used for phlebotomy, it is preferred that at least the forward portion

230 of the hub 225 be transparent, or otherwise allow a user of the

expandable penetrating needle 200 to view a flow of blood from the patient's

vein. In this manner, the phlebotomist is able to determine with certainty that

the expandable penetrating needle 200 has been adequately inserted into the

vein. As is best observed in Figures 4a-4b, the shaft 205 of the expandable

penetrating needle 200 has also been modified to facilitate this process. More

specifically, in this embodiment of the expandable penetrating needle, arcuate

sections of the needle shaft segments 240, 245, 250 have been removed

along the abutting edges 255 (i.e., along the score lines, cut lines, etc., that

separate the segments) thereof. Thus, small elliptical-shaped apertures 280

are formed through the needle shaft 205 to allow a small amount of blood to

flow into the interior of the expandable penetrating needle 200 while it is still in

an unexpanded state. Preferably, the apertures 280 are located toward the

tip 215 of the needle shaft 205 so that the initial blood flow may be

established with only a minimal insertion of the needle tip into the patient's

vein. It is further contemplated that more than one aperture like that shown

may be located between the segments, or that one or more apertures of other

shape and size may be located between the segments 240, 245, 250 of the

needle shaft 200. Alternatively, a single aperture, or multiple apertures may

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be located wholly in each segment 240, 245, 250 of the needle shaft 205, as

opposed to along the abutting edges **255** thereof.

The expandable penetrating needle 200 of Figures 4a-4b and 5a-5c [0032]

is shown in Figures 6a-6b during its use in a venipuncture procedure. In this

example, the expandable penetrating needle 200 is used in conjunction with

the hypodermic needle 5 and syringe 55 of Figures 2a-2b, although it should

be realized that the expandable penetrating needle could be configured to

work with virtually any venipuncture device. In the example of Figures 6a-6b,

the hypodermic needle 5 and syringe 55 may be used, for example, to

introduce an intravenous drug to the patient, or to obtain a blood sample.

[0033] In Figure 6a, the expandable penetrating needle 200 has been

inserted into the arm 285 of a patient, whereby the shaft 205 of the

expandable penetrating needle has penetrated the patient's skin 290 and the

tip 215 of the expandable penetrating needle has penetrated a vein 295 of the

patient. In this example, the vein 295 is shown to be collapsed or of small

size in order to demonstrate how an expandable penetrating needle of the

present invention can facilitate entry thereto more easily than a typical needle.

As can be seen, the expandable penetrating needle 200 is oriented at a slight

angle with respect to horizontal (and the patient's arm). However, unlike with

a typical needle, it should be understood that the conical shape of the

expandable penetrating needle 200 may also allow an entry angle (not

shown) into the patient's arm that is more vertical.

As can be observed from Figure 6a, the tip 215 of the expandable

penetrating needle 200 creates an initial entryway into the vein 295 of the

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patient. However, this initial entryway is of much smaller diameter than would

be created by the cutting action of a typical beveled needle. Preferably,

apertures 280 or other similar features in the needle shaft 205 allow an initial

blood flow to be established, thereby indicating to the user thereof that proper

entry of the expandable penetrating needle 200 into the vein 295 has been

made. Once the expandable penetrating needle 200 has been properly

inserted into the vein 295, it is preferably, but not necessarily, secured to the

patient, such as with a piece of tape.

[0035] Once proper insertion of the expandable penetrating needle 200

into the vein has been established, the hypodermic needle 5 can be inserted

therethrough. Progressive insertion of the hypodermic needle 5 into the

expandable penetrating needle 200 causes a gradual expansion of the

expandable penetrating needle shaft 205, as well as a gentle expansion of the

initial entryway created in the vein 295. As can be seen in Figure 6b, once

the hypodermic needle 5 is substantially fully inserted into the expandable

penetrating needle 200, the expandable penetrating needle shaft 205

becomes substantially fully open (expanded). Thus, the initial entryway in the

vein 295 is stretched sufficiently to allow insertion of the larger diameter

hypodermic needle 5, without forcing the hypodermic needle into the vein or

requiring any additional cutting thereof. As can be seen in Figure 6b, the

expanding action of the needle shaft 205 acts to open up the previously

collapsed section of the vein 295, thereby permitting access by the

hypodermic needle 5 without fully penetrating or otherwise causing additional

damage to the vein.

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As a byproduct of the design of the expandable penetrating needle

of the present invention, the expandable penetrating needle may be provided

For example, in the embodiment shown in with a self-blunting feature.

Figures 3a-3b, extension of the tubing 160 past the distal end 110 of the

needle shaft 105 effectively blunts the end of the expandable penetrating

needle 100. As the expandable penetrating needle 100 may be moved along

the tubing 160 in a direction away from the patient after insertion of the tubing,

or may otherwise be removed from the patient along with the tubing,

accidental needle sticks can be prevented. Similarly, in the embodiment of

the expandable penetrating needle 200 illustrated in Figures 4a-4b and 5a-5c,

a blunt-ended needle may be substituted for the beveled second needle 265

shown. Consequently, insertion of a blunt-ended second needle to a point

wherein its blunt end extends slightly beyond the end 210 of the shaft 205 of

the expandable penetrating needle 200, acts as a safety device (guard) to

prevent accidental needle sticks from the sharp points 215 thereof. Thus, in

certain embodiments, the expandable penetrating needle of the present

invention may be a part of a self-blunting apparatus.

While certain exemplary embodiments of the present invention are [0037]

described in detail above, it should be realized that a pluarality of

modifications are possible within the scope of the invention. For example, as

mentioned above, the expandable penetrating needle of the present invention

can be configured to connect to substantially any venipuncture device

available. The expandable penetrating needle may be manufactured from

virtually any material that provides the necessary strength and allows for the

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segmentation thereof. A multitude of different connectors, guards, etc., may

be provided for storing and/or covering the expandable penetrating needle

after its initial use. Further, the expandable penetrating needle of the present

invention is not limited to use in venipuncture procedures, or to medical

procedures in general but, rather, may be employed anywhere a needle would

typically be used to pierce or penetrate a material. Therefore, the present

invention is not to be considered limited by the above disclosure of exemplary

embodiments, and modifications are possible without departing from the spirit of

the invention as evidenced by the following claims: